PTO/SB/22 (04-07)
Approved for use through 09/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional) 2000522.00125US2		
Application Number 09/841,465-Conf. #5373			Filed	April 24, 20	01
For SYSTEM AND METH	OD FOR SIMULTANE	OUS BROADCAST	FOR PERSONAL	LIZED MESSA	GES
Art Unit 2623			Examiner	M. P. Van Handel	
This is a request under the pridentified application. The requested extension and				. •	
<u> </u>		Small Entity F	-ee		
One month (37 C	FR 1.17(a)(1))	\$120	\$60	\$	
Two months (37 CFR 1.17(a)(2))		\$450	\$225	\$	
x Three months (37 CFR 1.17(a)(3))		\$1020	\$510	\$	510.00
Four months (37 CFR 1.17(a)(4))		\$1590	\$795	\$	
Five months (37 CFR 1.17(a)(5))		\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.      A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-0219  I have enclosed a duplicate copy of this sheet.					
assign Sta  X attorne	ee of record of the entitement under 37 CFR by or agent of record. If by or agent under 37 CFR	3.73(b) is enclosed Registration Numbe FR 1.34.	d. (Form PTO/SB	·	

June 18, 2007 Date

Philip R. Poh (212) 230-8800 Telephone Number Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

forms are submitted.

Express Mail Label No. EM 086874745 US Dated: June 18, 2007